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PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Filing Date 10/768.507 01/30/2004 To be Mailed Substitute for Form PTO-875 APPLICATION AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY RATE (\$) FEE (\$) NUMBER FILED NUMBER EXTRA RATE (\$) FEE (\$) FOR ☐ BASIC FEE N/A N/A N/A N/A (37 CFR 1.16(a), (b), or (c)) SEARCH FEE N/A N/A N/A N/A (37 CFR 1.16(k), (i), or (m)) **EXAMINATION FEE** N/A N/A N/A N/A (37 CFR 1.16(o), (p), or (q)) **TOTAL CLAIMS** OR X \$ X S minus 20 = (37 CFR 1.16(i)) INDEPENDENT CLAIMS minus 3 = X \$ = X \$ = (37 CFR 1.16(h)) If the specification and drawings exceed 100 sheets of paper, the application size fee due ☐ APPLICATION SIZE FEE is \$250 (\$125 for small entity) for each (37 CFR 1.16(s)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j)) * If the difference in column 1 is less than zero, enter "0" in column 2. **TOTAL** TOTAL APPLICATION AS AMENDED - PART II OTHER THAN (Column 3) SMALL ENTITY OR SMALL ENTITY (Column 1) (Column 2) ADDITIONAL REMAINING NUMBER **PRESENT** ADDITIONAL 02/14/2007 RATE (\$) RATE (\$) AFTER **PREVIOUSLY EXTRA** FEE (\$) FEE (\$) AMENDMENT PAID FOR ENDME Total (37 CFR · 19 = 0 0 Minus ·· 24 X \$ = OR X \$50= Independent (37 CFR 1.16(h)) ***3 = 3 X \$200= 600 Minus = OR * 6 X \$ Application Size Fee (37 CFR 1.16(s)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) TOTAL TOTAL ADD'L 600 ADD'L OR FEE (Column 3) (Column 1) (Column 2) CLAIMS HIGHEST PRESENT ADDITIONAL ADDITIONAL REMAINING NUMBER RATE (\$) RATE (\$) **PREVIOUSLY AFTER FXTRA** FEE (\$) FEE (\$) AMENDMENT PAID FOR Total (37 CFR Ш Q Minus X \$ OR X \$ = ENDM Independent (37 CFR 1.16(h) *** X \$ = OR X \$ = Minus Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) OR TOTAL TOTAL ADD'L OR ADD'L FFF FFF * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. Legal Instrument Examiner: ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". Jacqueline E. Couplin *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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